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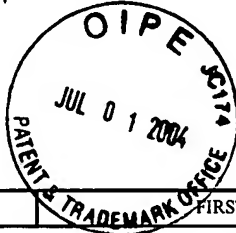
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38834 7590 04/01/2004

WESTERMAN, HATTORI, DANIELS & ADRIAN, LLP
 1250 CONNECTICUT AVENUE, NW
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(Signature)
(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/084,920	03/01/2002	Kiyoshi Chinzei	020276	7135

TITLE OF INVENTION: IMAGE FORMING APPARATUS WITH REDUCED DEVIATION OF CONTINUOUS RECORDING PAPER

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1330	\$300	\$1630	07/01/2004

EXAMINER	ART UNIT	CLASS-SUBCLASS
BEATTY, ROBERT B	2852	399-384000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
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2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1. WESTERMAN, HATTORI
 2. DANIELS & ADRIAN, LLP
 3. _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

FUJI XEROX, LTD.

TOKYO, JAPAN

Please check the appropriate assignee category or categories (will not be printed on the patent); ☐ individual ☒ corporation or other private group entity ☐ government

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4b. Payment of Fee(s):

☒ Issue Fee☐ A check in the amount of the fee(s) is enclosed.☒ Publication Fee☐ Payment by credit card. Form PTO-2038 is attached.☒ Advance Order - # of Copies 3☒ The Director is hereby authorized by charge the required fee(s), or credit any overpayment Deposit Account Number 50-2866 (enclose an extra copy of this form).

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(Authorized Signature)

(Date)

John P. Kong (40 054)

07/01/2004

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07/06/2004 BSAYAS12 00000027 10084920

01 FC:1501
 02 FC:1504
 03 FC:8001

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